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| <b>TRANSMITTAL<br/>FORM</b><br><i>(to be used for all correspondence after initial filing)</i> |                        | Application Number   | 10/725,837        |
|  |                        | Filing Date          | December 1, 2003  |
|  |                        | First Named Inventor | Tony REID         |
|  |                        | Art Unit             | 3771              |
|  |                        | Examiner Name        | Clinton T. OSTRUP |
| Total Number of Pages in This Submission   | Attorney Docket Number | 017622-000130US      |                   |

| ENCLOSURES <i>(Check all that apply)</i>   |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |  |
| <input type="checkbox"/> Remarks      The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.   |  |   |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                                    |          |        |
|--|------------------------------------|----------|--------|
| Firm Name                                  | Townsend and Townsend and Crew LLP |          |        |
| Signature                                  | <i>Dana Buschmann</i>              |          |        |
| Printed name                               | Dana Buschmann                     |          |        |
| Date                                       | November 3, 2008                   | Reg. No. | 54,567 |

| CERTIFICATE OF TRANSMISSION/MAILING  |                       |      |                  |
|--|-----------------------|------|------------------|
| I hereby certify that this correspondence is being filed via EFS-Web with the United States Patent and Trademark Office on the date shown below. |                       |      |                  |
| Signature  | <i>Jeanette Yando</i> |      |                  |
| Typed or printed name  | Jeanette Yando        | Date | November 3, 2008 |